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Application Data Sheet

Application Information

Application number::

09/843,694

Filing Date::

April 30, 2001

Application Type::

Regular

CD-ROM or CD-R?::

Number of CD Disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form

(CRF)?::

Number of copies of CRF::

Title::

THERAPEUTIC

COMPOSITIONS

Attorney Docket Number::

LCM-604-591

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Petition included?::

Yes

Petition Type::

Petition Under 37 CFR

1.78(a)(6)

Petition Under 37 CFR 1.137(b)

Licensed US Govt. Agency::

Contract or Grant Numbers::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

United States

Status::

Full Capacity

Given Name::	Richard
Middle Name::	L.
Family Name::	Veech
Name Suffix::	
City of Residence::	Rockville
State or Province of Residence::	MD
Country of Residence::	United States
Street of mailing address::	712 Brent road
City of mailing address::	Rockville
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	20850
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	·
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	

Given Name::

Family Name::	
Name Suffix::	
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State or Province of Residence::	
Country of Residence::	
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State or Province of mailing address::	
Country of mailing address::	
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Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	
Given Name::	
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Family Name::	
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City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Correspondence Information	

Correspondence Customer Number::

Middle Name::

23117

Representative Information

Representative Customer Number::

23117

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This application

Continuation of

09/397,100

09/16/99

Continuation-in-Part of PCT/US98/05072

03/17/98

which claims priority of

60/040,858

03/17/97

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority Claimed::

DAY/MONTH/YEAR

PCT/US98/05072

17 MARCH 1997

Yes

Assignee Information

Assignee 'Name::

BTG International Limited

Street of mailing address::

10 Fleet Place

City of mailing address:

London

State or Province of mailing

address::

Country of mailing address::

United Kingdom

Postal or Zip Code of mailing

EC4M 7SB

Address::

Assignee Name::

Street of mailing address::

City of mailing address:

State or Province of mailing

address::

Country of mailing address::

Postal or Zip Code of mailing

Address::

Respectfully submitted,

NIXON & VANDERHYE P.C.

By: /Leonard C. Mitchard/

Leonard C. Mitchard Reg. No. 29,009

LCM:Iff 901 North Glebe Road, 11th Floor

Arlington, VA 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

Supplemental Application Data Sheet

Application Information

Application number::

09/843,694

Filing Date::

April 30, 2001

Application Type::

Regular

CD-ROM or CD-R?::

Number of CD Disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form

(CRF)?::

Number of copies of CRF::

Title::

THERAPEUTIC

COMPOSITIONS

Attorney Docket Number::

LCM-604-591

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Petition included?::

Yes

Petition Type::

Petition Under 37 CFR

1.78(a)(6)

Petition Under 37 CFR 1.137(b)

Licensed US Govt. Agency::

Contract or Grant Numbers::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

United States

Status::

Full Capacity

Given Name::	Richard
Middle Name::	L.
Family Name::	Veech
Name Suffix::	
City of Residence::	Rockville
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City of mailing address::	Rockville
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	20850
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	

Given Name::

Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::
Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status::
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence::
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address::
Postal or Zip Code of mailing address::
Correspondence Information

Correspondence Customer Number::

23117

Representative Information

Representative Customer Number::

23117

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This application

Continuation of

09/397,100

09/16/99

Continuation-in-Part of

PCT/US98/05072

03/17/98

which claims priority of

60/040,858

03/17/97

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority Claimed::

DAY/MONTH/YEAR

Assignee Information

Assignee Name::

BTG International Limited

Street of mailing address::

10 Fleet Place

City of mailing address:

London

State or Province of mailing

address::

Country of mailing address:: •

United Kingdom

Postal or Zip Code of mailing

EC4M 7SB

Address::

Assignee Name::

Street of mailing address::

City of mailing address:

State or Province of mailing

address::

Country of mailing address::

Postal or Zip Code of mailing Address::

Respectfully submitted,

NIXON & VANDERHYE P.C.

By: /Leonard C. Mitchard/ Leonard C. Mitchard

Reg. No. 29,009

LCM:Iff 901 North Glebe Road, 11th Floor Arlington, VA 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100